									Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECO Effective December 29, 1999									(29	(ol	85	85	
CLAIMS AS FILED - PART I (Column 1) (Column 2)									LL	ENTITY	OR	OTHER		
FOR NUMBER FILED NUMBER EXTRA							EXTRA	RAT	E	FEE	1	RATE	FEE	
BASIC FEE							Ξ			345.00	OR		690.00	
TC	OTAL CLAIMS		<u>S</u> (minus	20=	· 60		X\$ 9)=		OR	X\$18=	1080	
IN	DEPENDENT CL	_AIMS		minus	3 =	· /			X39=		OR	X78=	78	
MULTIPLE DEPENDENT CLAIM PRESENT									+130=			+260= <		
* If the difference in column 1 is less than zero, enter "0" in column 2									TOTAL		OR OR	TOTAL	1848	
CLAIMS AS AMENDED - PART II											•	OTHER		
			umn 1)	i ev man		olumn 2)			SMALL ENTITY		OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT			PR	NUMBER EVIOUSLY PAID FOR	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*		Minus	**		=	X\$ 9=			OR	X\$18=		
	Independent	<u> </u>			***	ENT OLAIN	=	X39=			OR	X78=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									=		OR	+260=		
								TO [*]			OR	TOTAL ADDIT, FEE		
		(Column 3)	7,5511.1											
NDMENT B		REM Af	AIMS AINING TER IDMENT			HIGHEST NUMBER EVIOUSLY PAID FOR	PRESENT EXTRA	RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•		Minus	**		=	X\$ 9	=		OR	X\$18=	i i	
AMEN	Independent	ependent + RST PRESENTATION OF M			Minus ***		=	X39=	=		OR	X78=		
	FINOT FRESE	MIAIIC	N OF WIC	JUIPLE DEF	END	ENT CLAIV		+130:	=		OR	+260=		
·									AL EE	·	OR	TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)											•			
AMENDMENT C		REM.	AIMS AINING TER DMENT		PR:	IIGHEST IUMBER EVIOUSLY AID FOR	PRESENT EXTRA	RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*		Minus	**		=	X\$ 9=	=		OR	X\$18=		
	Independent			Minus +		ENIT OL AIRA]=	X39=			OR	X78=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+130=			OR	+260=		
• 1	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20"											TOTAL		
****	f the "Highest Nur	mber Pre	viously Pa	aid For" IN THIS	SSPA	CE is less tha	in 20, enter 20 in 3, enter "3." e highest number fo	ADDIT. FI	_	propriate box	•	ADDIT. FEE l umn 1.		
	-		•	,		,		J				•		